



Indiana

Interagency Memorandum of Agreement

Regarding

Provision of Services to Young Children with Special Needs and Their Families

2006

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**Indiana Interagency Memorandum of Agreement
Regarding
Provision of Services to Young Children
With Special Needs and Their Families**

Parties to the Agreement

The Indiana Family and Social Services Administration

Division of Family Resources, Bureau of Child Care
Division of Family Resources, Indiana Head Start Collaboration Office
Division of Disability and Rehabilitation Services, Bureau of Child Development
Services, First Steps

The Indiana Department of Education

Division of Exceptional Learners
Division of Prime Time

The Indiana State Department of Health

Division of Maternal and Children's Special Health Care Services

Administration for Children and Families (ACF), Region V

The Indiana Head Start Association

I. INTRODUCTION

This agreement is developed in response to requirements of the Individuals with Disabilities Education Improvement Act (IDEIA), the federal early intervention/special education legislation. The agencies participating in this agreement are working cooperatively to provide coordinated services to young children from birth through age eight and their families and insure the implementation of federal and state laws and regulations.

The original agreement was signed by five Indiana agencies in 1988. In 1991, the agreement was expanded and revised with Head Start, a key player in the statewide coordination of services to young children, entering the agreement. In 1991 and 1992, the Indiana General Assembly reorganized and codified Indiana's family and social services agencies. The early intervention system for infants and toddlers with disabilities was transferred under new statutes to the Division of Family and Children, Bureau of Child Development, First Steps. This Division operated under the policy authority of the Family and Social Services Administration. When the 1991 agreement was replaced with the joint agreement in 1999, the early intervention system developed separate agreements with the Indiana State Department of Health and the Office of Medicaid Policy and Planning in the Family and Social Services Administration. In 1999, the Indiana Interagency Memorandum of Agreement was signed by the Indiana Family and Social Services Administration, Division of Family and Children, Bureau of Child Development, the Indiana Department of Education, Division of Special Education, the Federal Administration for Children and Families, Region V, and the Indiana Head Start Association.

PARTIES TO AGREEMENT

This joint agreement replaces the agreement signed in 1999. This joint statement of agreement includes four new partners: the Division of Family Resources, Bureau of Child Care; the Indiana Department of Education, Division of Prime Time; the Indiana State Department of Health, Division of Maternal and Children's Special Health Care; and the Head Start Collaboration Office. In addition to the new partners, the parties to the agreement include the Division of Disability and Rehabilitation Services, Bureau of Child Development Services, First Steps in the Family and Social Services Administration; the Division of Exceptional Learners in the Indiana Department of Education; the Administration for Children and Families (ACF), Region V; and the Indiana Head Start Association. It affects the staff of the signatory agencies, as well as local early intervention providers, local education agencies (LEAs), local Head Start grantees, Early Head Start grantees, and Indiana Migrant Head Start Program [Texas Migrant Council, Inc. (TMC) Migrant Head Start Program], and licensed child care, ministries, and homes.

All parties to this agreement will be referred to as agencies and have agreed to periodic review and update of the agreement when necessary. This agreement becomes effective upon the signatures of the approving officials of the respective agencies and shall remain in effect until supplanted by another Memorandum of Agreement. The agencies affirm their support for comprehensive, coordinated planning and implementation of services to young children with disabilities and their families. This edition reflects the changes recommended in a review completed by the signatory agencies in 2005/2006.

II. PURPOSE STATEMENT

The purpose of this joint agreement is to reinforce the establishment and maintenance of an interagency service system for children with disabilities ages birth through eight and their families based on coordinated team work. It provides a policy framework for integration of effort and guidance for implementation.

The cosigners are committed to the following guiding principles:

- Children with disabilities are children first and to the extent possible are enabled to participate in the full range of activities in integrated settings with their typically developing peers.
- Parents provide the primary learning environment for children.
- Family involvement and support is a critical component of effective services for children.
- The best interests of children are served when parents and service providers work in partnership.
- A team-based, comprehensive plan is necessary for the successful transition of children and families from one service system to another.

- Education of families and community partners regarding state and local referral processes is necessary in order to ensure provision of services regardless of a child's ability, socioeconomic level and/or other special needs.
- Team resource sharing enables communities to pool resources to provide more comprehensive, high quality services in an integrated manner.

This agreement specifies co-signer roles and responsibilities, encourages consultation and collaboration in service planning and design, identifies a transition system, defines financial responsibilities, and establishes a dispute resolution process.

III. AUTHORITY

- 20 U.S.C. §§ 1400 *et seq.* - Individuals with Disabilities Education Improvement Act of 2004, PL 108-446
- I.C. 20-35 - Special Education
- 511 I.A.C. 7 - Indiana State Board of Education Special Education Rules – Article 7
- 470 I.A.C. 3.1 - First Steps Early Intervention System
- I.C. 12-17-15 - Infants and Toddlers with Disabilities Program
- 42 U.S.C. §§ 9831 *et seq.* - School Readiness Act of 2005
- 45 C.F.R. Parts 1301, 1304, 1305 and 1308 - Head Start Program
- I.C. 16-41-17-2 Universal Newborn Hearing Screening
- I.C. 16-35-2 Children's Special Health Care Needs
- 410 I.A.C.3.2 - Children's Special Health Care Needs
- I.C. 12-17.2 - Regulations of Child Care Centers

IV. FUNDAMENTAL PRINCIPLES AND ACTIVITIES

The following fundamental principles are identified as essential to establishing a comprehensive, coordinated system of services for young children from birth through age eight and their families and should be reflected in the stated activities of the agencies:

A. Parent Involvement and Family Support

Family involvement is critical to providing effective services for young children. When parents and professionals work together in partnership, the foundation for success is laid for children and families. Services must be responsive to the changing needs of families and enhance the capacity of families to meet their child's special needs.

The agencies agree to:

- Provide information to parents about ways to connect to family support resources, including related agencies, services, training, support groups, advocacy organizations and family leadership opportunities.
- Involve parents of children with special needs on state level boards, commissions, and advisory groups that have responsibility for young children with special needs and their families. Consideration is given to scheduling meetings at convenient times for parents, providing stipends for reimbursement for time, transportation, child care expenses, and developing a variety of ways to encourage parental input, both formal and informal.
- Partner with parents in planning and conducting conferences, in-service training, program development, implementation, program evaluation, and policy formation, including inviting parents to be trainers or co-trainers at these events.
- Maintain standards that encourage involvement of parents on local, regional and state advisory groups, e.g., Governor's Interagency Coordinating Council on Infants and Toddlers, First Steps Local Planning and Coordinating Councils, Indiana Head Start Association and committees, local parent advisory councils or groups in schools, and State Advisory Council on the Education of Children with Disabilities.

- Promote parents and personnel as equal partners in the development of the Individualized Family Service Plan and the Individualized Education Program.
- Support culturally diverse approaches to service delivery that reflect sensitivity to the different cultures involved in First Steps, early childhood special education, child care, Head Start and kindergarten. Make efforts to enhance the capacity of the signatory agencies and their local providers to identify, evaluate, and meet the needs of under represented groups, including low income and minority populations.
- Assure the protection of parent rights and procedural safeguards in accordance with the regulations of each program.
- Provide information to families in a variety of communication modes, as needed, to increase understanding (e.g., written, spoken, audio, video, native language).

B. Quality Services for All Children with and without Disabilities.

The agencies fully recognize that goals for all families remain similar, to raise children that are happy and healthy and are able to participate fully in the community in which they live. It is also recognized that young children develop and learn differently than adults and benefit from the interaction and modeling of typically developing peers. In meeting the needs of young children, it is important that efforts be made to provide supports to families in the environments and settings where children and families without disabilities participate. In addition, agencies are encouraged to look at both location of services and whether the services are supportive of families' routines and activities.

The agencies agree to:

- Support orientation and in-service training to communicate and reinforce the underlying principles of this agreement.
- Support a service delivery system promoting integration of children with special needs into natural environments and least restrictive environments where children without disabilities participate.
- Promote recommended guidelines for providing services that reflect both developmentally and individually appropriate practices.

C. Interagency Coordination and Non-Duplication

Cooperation and shared responsibility are necessary components of a team based service delivery system that can meet the varied needs of children and families. No single agency can provide all services to all children and families. Interagency coordination is essential at both the state and local levels. The state level agencies must assume a role as partner with local communities. In order to develop a coordinated system, agencies providing similar services will promote the development of unified procedures and reduce unnecessary duplication, which creates barriers for families.

The partnering agencies agree to work as a team to:

- Develop mechanisms for communication of activities that impact services to children among the signatory agencies.
- Share existing policies related to children's services with the other signatory agencies.
- Share and review any contemplated policies related to children's services with the other signatory agencies.
- Promote and insure continued collaborative staff development among agencies, e.g., sharing dollars for training. Blend funding streams for training and services when applicable policies allow. Whenever possible, state and local agencies are encouraged to invite staff from the other agencies to participate in training.
- Support criteria that require demonstration of local collaborative efforts in grant submission.
- Share information about resources that are available within each agency that are mutually helpful, e.g., training calendars. Each agency will be responsible for sharing resources with their local networks.
- Support local interagency initiatives in the development and implementation of service delivery systems.

- Promote the development and maintenance of local councils which have diversity of membership representation.
- Support local interagency initiatives including the development of local memoranda of understanding or interagency agreements.

V. ROLES OF AGENCIES IN SYSTEM COORDINATION AND IMPLEMENTATION

There are a number of roles and responsibilities which are essential to the successful implementation of a comprehensive, coordinated services system for young children and their families. These include public awareness, child find and referral procedures, evaluation and assessment, individualized service plans, procedural safeguards, confidentiality, legal protections, transition, comprehensive system of personnel development, confidentiality, and program rules and monitoring.

A. Public Awareness-Child Find

This component focuses on early identification of eligible children and includes informing the public about services and the child find system. The participating agencies will work together to locate and identify children in need of services. Child find activities are conducted at no expense to the parent/legal guardian. The participating agencies will partner on activities to promote public awareness about the availability and benefit of services for all young children regardless of ability and socioeconomic level and their families. The partnership will assist families to identify and access community resources.

Family Social Services Administration	Indiana State Department of Health	Indiana Department of Education	Head Start
Division of Disability and Rehabilitative Services, Bureau of Child Development services, First Steps	Maternal and Children's Special Health Care Services (MCSHC)	Division of Exceptional Learners (DEL)	Indiana Head Start Collaboration Office, Indiana Head Start Association, and ACF
<p>First Steps will develop public awareness materials about Indiana's early intervention system and the child find system including the purpose and scope of the system, how to make referrals, how to gain access to an evaluation and services and the central directory. Materials can be located on the First Steps web site. www.in.gov/fssa/first_step</p> <p>Local Planning and Coordinating Councils (LPCC) are responsible for developing and implementing child find activities and distributing referral materials.</p>	<p>Commission of Community and Family Health Services will cooperate in the development of the Public Awareness effort.</p> <p>Division of Maternal and Children's Special Health Care Services (MCSHC) will provide families with information about early intervention services, EPSDT and public health services through the Indiana Family Helpline (1-800-433-0746) and Children's Special Health Care Services (CSHCS), (1-800-475-1355).</p>	<p>Local education agencies (LEAs) are required to:</p> <ul style="list-style-type: none"> • provide public awareness and information activities, • publish a notice of child identification in newspapers, • publish or provide other information in a non-English format to inform groups that are in the public school's area that have other modes of communication that are not English. <p>The DEL publishes a developmental wheel "From Crib to Kindergarten" that is available from the</p>	<p>Head Start Grantees are required to do outreach and recruitment activities to actively locate and recruit children with disabilities. Head Start agencies will be encouraged to coordinate major public awareness activities conducted by various public and private agencies within their local jurisdiction.</p>

	<p>MCSHC will provide information and resources through distribution of the CSHCS Express newsletter and will post materials on the web site: www.statehealth.in.gov. MCSHC will provide technical assistance to Child Care Providers as to requirements/best practices through the Child Care Health Consultant Program (CCHCP). This will include guidance to identify children with special needs and to make appropriate referrals.</p>	<p>Indiana Educational Resource Center (1-800-833-2198).</p> <p>The DEL will encourage LEAs to coordinate major public awareness activities being conducted by various public and private agencies within their local jurisdiction.</p>	<p>Indiana Head Start Collaboration Office and Indiana Head Start Association provide information and resources through distribution of materials and the web sites: www.ihsassoc.org and www.in.gov/fssa/children/headstart</p>
Division of Family Resources, Bureau of Child Care		Division of Prime Time	
<p>Child Care Services provides the CareFinder Indiana website: www.childcarefinder.IN.gov This website offers:</p> <ul style="list-style-type: none"> ●The ability to locate childcare providers (listing of licensed centers, licensed homes, and registered ministries) via county, city or zip code; ●Childcare provider information (including: location, phone number, capacity, hours of operation); ●Inspection information (licensing and health/food/sanitation surveys), complaint information, and enforcement information; ●Childcare policies, rules, and laws; ●Childcare information, alerts, resources, and website links; ●Training and orientation for providers. 			

B. Referral Procedures

This agreement recognizes that child find responsibilities overlap among the agencies participating in this agreement. There should be ongoing dialogue regarding procedures for the referral process. The goal of this process is to prevent duplication of effort. Shared activities such as joint screening are encouraged. It is recommended that agencies at the local level determine shared responsibility. It is recommended that local agreements address the use of consistent or compatible instruments for screening, evaluation, and identifying information that is needed during the referral process. Intensive interagency efforts should be made that include procedures for referring children to the appropriate agency for evaluation or services as appropriate.

Family Social Services Administration	Indiana State Department of Health	Indiana Department of Education	Head Start
Division of Disability and Rehabilitative Services, Bureau of Child Development Services, First Steps	Maternal and Children's Special Health Care Services (MCSHC)	Division of Exceptional Learners (DEL)	Indiana Head Start Collaboration Office, Indiana Head Start Association, and ACF
<p>Under IDEIA, Part C, the First Steps early intervention system is responsible for ensuring that all children eligible for early intervention are located and identified. The Part C First Steps system, the state education agency (SEA), and the Local Education Agency (LEA) become a part of the each others informed referral network.</p> <p>The First Steps office will disclose information to LEAs for the specific purpose of assisting the SEA and LEA in implementing child find procedures in compliance with federal legal requirements.</p> <p>First Steps Request For Funds (RFF) for Local Planning and Coordinating Councils requires a local Memorandum of Agreement (MOA) between First Steps, Schools, and Head Start that addresses referral procedures.</p>	<p>MCSHC will work cooperatively to establish compatible procedures for mutual referral and acceptance of evaluation and assessment information.</p> <p>MCSHC will assist in development of a unified enrollment/referral process through the Combined Enrollment process/Universal Application System.</p> <p>MCSHC will collaborate with other agencies, including Office of Medicaid Policy and Planning (OMPP) and Division of Mental Health Administration (DMHA), to develop appropriate screenings for children with physical, social, emotional and developmental problems. The system will include referral for evaluation, assessment and treatment.</p>	<p>Under federal and state regulations, LEAs are responsible for maintaining a comprehensive child find system from birth through 21 years of age for identifying children who are in need of special education. The SEA, LEAs, and the First Steps system become a part of each others informed referral network.</p>	<p>Head Start grantees will develop Head Start disability plans addressing coordinated child find efforts.</p> <p>Head Start grantees serving infants and toddlers will refer infants and toddlers with suspected delays or disabilities to the local early intervention program.</p> <p>Head Start grantees serving children, ages three through five, will refer children with suspected disabilities to the local education agency.</p> <p>The Indiana Head Start Association and The Indiana Head Start Collaboration Office will encourage programs to develop MOAs at the local level.</p>

	<p>MCSHC will coordinate any major child find efforts with other parties in this agreement.</p> <p>MCSHC will work through CCHCP to identify and refer children as appropriate.</p>		
Division of Family Resources, Bureau of Child Care		Division of Prime Time	
<p>Licensing consultants will encourage licensed centers, registered ministries and licensed homes to refer parents to local Child Care Resource and Referral Agencies.</p> <p>Indiana Childcare Resource and Referral Grant supports referral procedures and child identification.</p> <p>Child Care Development Funds (CCDF) – Good Start Screening Tools support referral procedures and child identification.</p>		<p>Division of Prime Time supports the referral procedures as outlined in this agreement.</p>	

C. Screening, Evaluation and Assessment

Screening means a preliminary look at a child's level of functioning in fine and gross motor, cognitive, speech and language, social and emotional development, and hearing and vision, as well as health information. Evaluation means the procedures used to determine whether a child has a disability and the nature and extent of services a child needs according to the federal/state rules of the agency. Assessment means the on-going procedures used by appropriate qualified personnel throughout the period of a child's eligibility to identify the child's unique strengths and needs and the services appropriate to meet those needs, and the resources, priorities, and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their child.

Family Social Services Administration	Indiana State Department of Health	Indiana Department of Education	Head Start
Division of Disability and Rehabilitative Services, Bureau of Child Development Services, First Steps	Maternal and Children's Special Health Care Services (MCSHC)	Division of Exceptional Learners (DEL)	Indiana Head Start Collaboration Office, Indiana Head Start Association, and ACF
<p>First Steps assures that each child, birth through two, referred for evaluation and assessment, receives a comprehensive, multidisciplinary evaluation including assessment activities related to the child and the child's family. The evaluation and assessment must be conducted according to federal and state regulations.</p> <p>First Steps will promote joint strategies for conducting evaluations and exchanging information within confidentiality requirements.</p> <p>First Steps program rules promote consideration of existing evaluation data provided by other agencies during the evaluation process.</p>	<p>MCSHC will conduct mandated screenings under the universal newborn screening program.</p> <p>MCSHC may provide medical evaluations to determine eligibility of children with special health care needs at no cost to families and within limits of program eligibility and available resources.</p> <p>MCSHC will promote development of joint strategies for conducting evaluations and exchanging information within confidentiality requirements.</p> <p>Child Care Health Consultant Program (CCHCP) will promote inclusion of children with special health care needs into child care settings.</p>	<p>DEL assures that a comprehensive educational evaluation for all children 3 through 21 suspected of having a disability are conducted. The evaluation must be conducted according to federal and state regulations.</p> <p>The special education rules promote consideration of existing evaluation data provided by other agencies. The case conference committee must consider the individualized family service plan (IFSP).</p>	<p>Head Start children must receive a health and developmental screening and ongoing assessments according to current performance standards.</p> <p>Indiana Head Start Association and Indiana Head Start Collaboration Office will promote use of joint strategies for conducting evaluations and exchanging information within confidentiality requirements.</p>

Division of Family Resources, Bureau of Child Care		Division of Prime Time	
<p>The Bureau of Child Care supports the screening, evaluation and assessment activities outlined in this agreement.</p>		<p>Local school corporations conduct an annual vision test for children upon enrollment in either kindergarten or 1st grade. IC 20-34-3-12</p> <p>For admission, school children must receive proper immunization before attending school. IC 20-34-4-1</p>	

D. Service Plans

Service plans are written plans that describe individualized child and or family services.

Family Social Services Administration	Indiana State Department of Health	Indiana Department of Education	Head Start
Division of Disability and Rehabilitative Services, Bureau of Child Development Services, First Steps	Maternal and Children's Special Health Care Services (MCSHC)	Division of Exceptional Learners	Indiana Head Start Collaboration Office, Indiana Head Start Association, and ACF
<p>The Individualized Family Service Plan (IFSP) is a written plan for providing early intervention services to a child, age birth through two, eligible for early intervention services. The IFSP includes a statement of the specific early intervention services necessary to meet the unique needs of the child and the family to achieve the outcomes identified in the IFSP. The outcomes are to take account of parent desires and viewpoints and be written in language appropriate to them.</p>	<p>MCSHC will provide primary care for all Children's Special Health Care Services (CSHCS) enrolled children and specialty care for CSHCS enrolled children as it relates to their eligible medical condition if properly prior authorized.</p>	<p>The individualized education program (IEP) is a written document that describes how the student will access the general education curriculum (appropriate activities for preschool children) and the special education and related services needed to participate in the educational environment.</p>	<p>All Head Start grantees must develop disabilities service plans providing strategies for meeting the special needs of children with disabilities and their parents. The purpose of this plan is to assure: (1) that all components of Head Start are appropriately involved in the integration of children with disabilities and their parents and (2) that resources are used efficiently.</p> <p>Every child receiving services in Head Start, who has been evaluated and found to have a disability and in need of early intervention/special education, must have an IFSP/IEP before early intervention/special education services are provided. These services ensure coordinated and comprehensive information is used to develop the child's program. Head Start grantees must initiate the implementation of the IFSP/IEP as soon</p>

			<p>as possible after the IFSP/IEP meeting by modifying the child's program in accordance with the IFSP/IEP and arranging for the provision of related services.</p> <p>When children, ages three to five, with disabilities in Head Start do not have an IEP developed by the school due to a determination of ineligibility under Part B of IDEIA, the Head Start program develops an IEP in accordance with the Head Start Performance Standards.</p>
Division of Family Resources, Bureau of Child Care		Division of Prime Time	
<p>The Bureau of Child Care develops policies and procedures that support childcare providers who serve children with special needs.</p> <p>The inspection process requires direct observation of interventions and interactions between children and childcare providers.</p>		<p>"The Foundations for Young Children to the Indiana Academic Standards" help to guide instruction by outlining specific skills and offering examples of instructional strategies. They are accessible from the Division of Prime Time and Division of Exceptional Learners websites or by telephone request from the Indiana Educational Resource Center (1-800-833-2198). Websites: http://www.doe.state.in.us/primetime/welcome.html and http://www.doe.state.in.us/exceptional/speced/resources.html</p>	

E. Procedural Safeguards, Confidentiality, Legal Protections

Each agency will protect the rights of young children with disabilities with respect to records and reports as created, maintained and used by the public agencies. It is the intent of this agreement to ensure that parents have the rights of access, rights of challenge, and rights of privacy with respect to such reports and records, and that applicable state and federal laws for exercise of these rights be strictly followed.

Family and Social Services Administration	Indiana State Department of Health	Indiana Department of Education	Head Start
Division of Disability and Rehabilitative Services, Bureau of Child Development Services, First Steps	Maternal and Children's Special Health Care Services (MCSHC)	Division of Exceptional Learners	Indiana Head Start Collaboration Office, Indiana Head Start Association, and ACF
<p>Children with disabilities and their parents are afforded the procedural safeguards outlined in Part C of IDEIA and state laws and regulations, including opportunity to examine records, parent participation in meetings, prior notice requirements, parent consent, mediation, complaint procedures, due process hearings and all other areas described under procedural safeguards in state and federal law.</p> <p>Parents of eligible children are afforded confidentiality safeguards in disclosure, collection, maintenance, and destruction of information under both state and federal law.</p> <p>Early intervention records are covered under IDEIA and the Family Educational Rights and Privacy Act of 1974 and implementing regulations in 34 CFR part 99. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) applies to electronic billing records.</p>	<p>MCSHC will follow all policies and procedures established to meet the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Standards for Privacy of Individually Identifiable Health Information (PHI) Privacy Rule found in 45 Code of Federal Regulations of (CFR) Parts 160 and 164.</p> <p>Children with disabilities and their parents are afforded the procedural safeguards outlined in HIPPA including opportunity to examine records, parent participation in meetings, prior notice requirements, parent consent, mediation, complaint procedures, and due process hearings.</p>	<p>Children with disabilities and their parents are afforded the procedural safeguards outlined in Part B of IDEIA and state laws and regulations, including opportunity to examine records, parent participation in meetings, prior notice requirements, parent consent, mediation, complaint procedures, due process hearings and all other areas described under procedural safeguards in state and federal law.</p> <p>Parents of eligible children are afforded confidentiality safeguards in disclosure, collection, maintenance, and destruction of information under both state and federal law.</p> <p>Educational records are covered under IDEIA, Article 7, and the Family Educational Rights and Privacy Act of 1974 and implementing regulations in 34 CFR part 99.</p>	<p>Head Start grantees must establish and maintain efficient and effective record-keeping systems to provide accurate and timely information regarding children, families and staff and must ensure appropriate confidentiality of this information.</p> <p>Head Start grantees must ensure that all staff, consultants, and volunteers abide by the program's standard of conduct which must specify that they will follow program confidentiality policies concerning information about children, families, and other staff members.</p>

Division of Family Resources, Bureau of Child Care		Division of Prime Time	
Indiana Child Care Rules and Regulations provide specific guidelines regarding confidentiality, safeguards, and complaint procedures.		Educational records are covered under the Family Educational Rights and Privacy Act of 1974 and implementing regulations in 34 CFR part 99.	

F. Personnel Development and Training

The agencies will collaborate in planning, developing, and conducting training for early childhood teachers, staff, service providers and families. The agencies will support the statewide coordination of training activities related to young children that will provide greater access to learning opportunities and enhance the knowledge and skills of personnel to provide high quality services to young children and their families. Coordination of planning efforts will include, but not be limited to, sharing needs assessments, offering cooperatively sponsored or jointly attended training activities, scheduling, evaluating, and disseminating information. Trainings offered shall reflect culturally competent practices and promote family-centered practices. Parental involvement will be encouraged in the planning and implementation of training, including parents as trainers and co-trainers.

Family Social Services Administration	Indiana State Department of Health	Indiana Department of Education	Head Start
Division of Disability and Rehabilitative Services, Bureau of Child Development Services, First Steps	Maternal and Children's Special Health Care Services (MCSHC)	Division of Exceptional Learners (DEL)	Indiana Head Start Collaboration Office, Indiana Head Start Association, and ACF
<p>The Unified Training System (UTS) established by the First Steps Early Intervention System in collaboration with the Division of Exceptional Learners, supports the statewide coordination of training activities and resource sharing.</p> <p>First Steps encourages posting of training events on the "Early Childhood Meeting Place", a centralized Indiana website that includes an events calendar, professional development opportunities, and information of interest to the early childhood field.</p>	<p>MCSHC will share resources among agencies of this agreement that could be mutually helpful. Sharing resources could mean material, staff expertise, space, data, training, and or technology.</p> <p>Through the Early Childhood Comprehensive System (ECCS), training related to social emotional development will be developed and delivered to early childhood providers. The ECCS supports development of a link for families on the "Early Childhood Meeting Place".</p>	<p>The Unified Training System (UTS) established by the First Steps Early Intervention System in collaboration with the DEL, supports the statewide coordination of training activities and resource sharing.</p> <p>The DEL encourages posting of training events on the "Early Childhood Meeting Place", a centralized Indiana website that includes an events calendar, professional development opportunities, and information of interest to the early childhood field.</p>	<p>Head Start grantees must establish and implement a structured approach to staff training and development. This system should be designed to help build relationships among staff and to assist staff in acquiring or increasing the knowledge and skills needed to fulfill their job responsibilities and that are necessary to implement the content of the Head Start Program Performance Standards.</p> <p>The Indiana Head Start Collaboration Office and the Indiana Head Start Association encourages posting of training events on the "Early Childhood Meeting Place."</p>

Division of Family Resources, Bureau of Child Care		Division of Prime Time	
<p>Indiana Rules for Child Care requires specific training and annual in-service education (Training requirements reviewed during the inspection process).</p> <p>Training and orientation is provided for persons interested in becoming a provider (licensed centers, licensed homes, and registered ministries).</p> <p>The Bureau of Child Care supports the Childcare Health Consultant Program that has resources to increase the level of health and safety in child care settings.</p>		<p>The Division of Prime Time provides professional development/training to “Indiana’s Ready to Learn, Ready Schools Initiative” grantees relating to transition from early childhood programs through kindergarten in the areas of evaluation, Head Start collaboration, assessment, facilitation, social/emotional competence, English Language Learners/ English as a Second Language, special education, homeless population, and program curricula.</p> <p>The Division of Prime Time provides information and resources on its website at: http://www.doe.state.in.us/primetime/welcome.html</p>	

G. Program Rules, Monitoring of Program and Child Outcomes, Technical Assistance

Each agency has compliance and monitoring systems in place. It is agreed that the agencies will support programs in the implementation of their quality assurance activities as appropriate. Results from monitoring or other quality assurance activities may be shared between programs upon request.

Each agency will share relevant legislation and regulations upon request. As appropriate, agencies will invite participation by the other agencies in the review of such areas as service definitions, program standards, eligibility, and development of related technical assistance.

Family and Social Services Administration	Indiana State Department of Health	Indiana Department of Education	Head Start
Division of Disability and Rehabilitative Services, Bureau of Child Development Services, First Steps	Maternal and Children's Special Health Care Services (MCSHC)	Division of Exceptional Learners (DEL)	Indiana Head Start Collaboration Office, Indiana Head Start Association, and ACF
<p>The Bureau of Child Development Services is responsible for all aspects of state administration of the First Steps early intervention system, including the general administration, supervision and monitoring of services, programs, and activities under the Infants and Toddlers program [Part C of IDEIA]. Activities within the lead agency include but are not limited to: the development and promulgation of rules and program guidance materials for service providers and Local Planning and Coordinating Councils (LPCCs); the establishment of inter/intra-agency agreements to ensure a coordinated service delivery system exists for children and families; implementation of a state-wide comprehensive public awareness program; coordination and implementation of a</p>	<p>MCSHC will work through the ECCS program to develop common quantifiable outcome measures for young children.</p> <p>Technical assistance to child care providers will be provided through the Child Care Health Consultant Program (CCHCP).</p>	<p>The DEL is responsible for the general supervision and monitoring of special education programs. These duties are carried out by data collection and verification, a dispute resolution system, a local education agency (LEA) annual application for funds, on-site monitoring, desk audits, self-assessments completed by each planning district, review of LEA policies and procedures, surveys, development of policies, procedures, and rules, a report annually to the public on the DEL State Performance Plan and performance of each LEA, and directed use of federal and state funds to ensure correction of noncompliance and improved performance.</p> <p>The DEL collects child outcome data on the % of preschool children with IEPs who demonstrate improved social-emotional skills, early</p>	<p>At least once each program year, with the consultation and participation of the policy groups and, as appropriate, other community members, Head Start grantees must conduct a self-assessment of their effectiveness and progress in meeting program goals and objectives and in implementing federal regulations including measurement of child outcomes.</p> <p>Head Start disabilities service plans must include commitment to special efforts to develop interagency agreements with the LEAs and other agencies within the Head Start service area. The agreement must address: Head Start participation in the public agency's child find plan, joint training of staff and parents, technical assistance, procedures for referral for evaluations, IEP</p>

<p>comprehensive system of personnel development including the establishment of personnel standards; data collection; and supervision and monitoring of providers participating in the early intervention system. Monitoring of First Steps early intervention system ensures compliance with statutes and regulations regardless of whether or not the services and activities are receiving federal funds. Monitoring responsibilities are met through administration of quality review activities for all LPCCs, System Point of Entries (SPOEs), individuals, agencies, and institutions receiving Part C of IDEIA assistance and include record audits, consumer survey, review of data reports, on-site peer review monitoring, fiscal review and procedural monitoring. This comprehensive quality assurance system identifies programs and services exhibiting best practice as well as area and programs in need of technical assistance and training. The development of quality improvement plans ensures compliance with state and federal regulations. The Bureau of Child Development Services has policies and procedures for handling complaints and concerns to ensure compliance and improved performance and is responsible for enforcing obligations imposed on service providers by regulation.</p>		<p>language/communication skills, early literacy skills, and use of appropriate behaviors to meet their needs.</p>	<p>meetings placement decisions, transition, resource sharing, Head Start commitment to provide the number of children receiving services under IEPs to the LEA for the Child County report by December 1, and any other items agreed to by both parties.</p>
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Division of Family Resources, Bureau of Child Care		Division of Prime Time	
The Bureau of Child Care conducts licensing and health/food/sanitation surveys to support a service delivery system that promotes the integration of children with special needs into natural environments (focus – childcare settings) where children without disabilities participate.		<p>The Division of Prime Time provides general supervision and monitoring of services including expenditure reports, action plan submissions, and documented progress.</p> <p>The Division of Prime Time monitors to ensure compliance with statutes and regulations and provides program guidance.</p>	

H. Transition

Division of Family Resources, Bureau of Child Care	Indiana State Department of Health, Maternal and Children's Special Health Care Services (MCSHC)	Indiana Department of Education, Division of Prime Time	
The Bureau of Child Care will support the transition efforts of the other agencies as outlined in this agreement.	<p>MCSHC will work cooperatively with the other parties in this agreement to establish compatible procedures for transitional activities.</p> <p>MCSHC will provide families information on transitional resources, referrals and materials through the Indiana Family Helpline and MCSHCS materials.</p>	The Division of Prime Time provides resources, technical assistance, training/access to training, and information to federal/state early childhood program – kindergarten transition pilots and initiatives to LEAs.	
Division of Disability and Rehabilitative Services, Bureau of Child Development Services, First Steps	Indiana Head Start Collaboration Office, Indiana Head Start Association, and ACF	Indiana Department of Education, Division of Exceptional Learners	
<p>First Steps, Head Start grantees, and the Division of Exceptional Learners have specific roles and responsibilities for providing a smooth and effective transition for young children with disabilities that are guided by state and federal laws. Please refer to section VI.</p>			

VI. SPECIFIC ROLES AND RESPONSIBILITIES FOR TRANSITION AMONG FIRST STEPS, EARLY CHILDHOOD SPECIAL EDUCATION, AND HEAD START

A comprehensive, community-wide system is necessary to ensure positive and effective transition experiences for children and families. We believe that this system includes:

- An interagency team that assesses the needs of the whole community, with all stakeholders involved, while ensuring the successful movement of children and families between and among agencies.
- Collaboratively developed policies and procedures, which are essential to the success of the community-wide transition system.
- Inclusion of the four critical components for implementing effective transition: administrative supports, staff involvement and training, family involvement, and child preparation.
- Change at the local level that is supported and facilitated at the state level.

Transition success relies on a collaborative team approach between all agencies and individual participants within the community that fosters understanding and agreement on key transition activities, issues, procedures, and formalization of agreements. With advanced planning and preparation of the child, family, and staff, the process can be a positive, effective experience for everyone involved.

This section clarifies procedures and responsibilities of the participating agencies to facilitate smooth and effective transitions. Local First Steps providers, local education agencies, and Head Start grantees are encouraged to develop agreements that will define relationships and areas of cooperation most appropriate to their local situations by using this agreement as a model. This agreement does not preclude the inclusion of other appropriate community service providers in the development of collaborative services.

A. Transmission of information

With the informed, written consent of the parent, the First Steps service coordinator shall notify the local education agency of the child's residence or Part B preschool service provider, or both, eighteen (18) months before a child's third birthday, or as soon as the child enters the early intervention system if he or she is older than eighteen (18) months when entering the system. The information to be provided by the service coordinator shall include the following:

1. The child's name.
2. The date of birth.
3. The suspected disability.

At least six (6) months [and not more than nine (9) months] before a child's third birthday, with the informed, written consent of the child's parent, the service coordinator shall transmit to the local educational agency of the child's residence, the following:

1. The most recent IFSP.
 2. The most recent evaluation reports from any appropriate sources.
 3. Other information determined with the family to be relevant to program planning and service delivery.
- The Head Start disabilities coordinator must arrange for further, formal, evaluation of a child who has been identified through screening or developmental assessment as possibly having a disability. The disabilities coordinator must refer a child to the local education agency as soon as the need is evident, starting on or before the child's third birthday or at the time a disability is suspected. If the local education agency does not evaluate the child, Head Start is responsible to evaluate with written parent consent.
 - Families enrolled in Early Head Start with infants and toddlers suspected of having a disability are to be promptly referred to First Steps to coordinate any needed evaluations, determine eligibility for Part C, and coordinate development of an Individualized Family Service Plan (IFSP) for children determined to be eligible under First Steps.

- Local education agencies, First Steps and Head Start grantees should establish compatible procedures for mutual referral of young children and their families.

B. Transition Conference

- The First Steps service coordinator shall convene, with the approval of the family, a transition conference including the family, the First Steps service coordinator, the local education agency, current service providers, and potential service providers, at least ninety (90) days prior to the child's third birthday, or up to nine (9) months prior to the child's third birthday, at the discretion of all parties required to attend the transition conference. The 90-day timeline may need to be moved back into the spring if the child's birthday is in the summer or early fall in order to ensure that a free appropriate public education is available beginning on the child's third birthday.
- If the parent wishes to consider services from the public school, the required participants in the transition planning conference include a First Steps service coordinator, the local education agency, and the family. The First Steps service coordinator will work with the family, school personnel and other potential providers when scheduling meetings. It is important to be mindful of work schedules and calendars. In the case of a child who may not be eligible for Part B services at age three, reasonable efforts should be made to include providers of appropriate services in the community such as Head Start or child care, etc.
- The purpose of the transition conference is to review the child's program options for the period from the third birthday through the remainder of the school year and establish a transition plan according to 470 IAC 3.1-11-4 (d) (2). This meeting may coincide with the periodic IFSP review meeting held at least every six (6) months, if appropriate, and as agreed to by all parties required to attend the transition conference. With parent permission, each local education agency shall participate in the transition meeting. Each local Head Start grantee shall make every effort to attend transition meetings to which they are invited.
- A transition plan will be developed at the transition conference, consistent with the requirements in 470 IAC 3.1-11-4(d). The First Steps Early Intervention System requires State IFSP forms including the transition packet.
- If a parent does not give consent to inviting the local education agency representative to the meeting, the First Steps service coordinator should make the parent aware that a delay in referring the child to the school system may cause a delay in obtaining written consent to evaluate and a delay in receiving services if the parent reverses the decision upon the child's third birthday.
- Until the child's third birthday, the service coordinator is responsible for coordinating the transition process for a child who is not eligible for early childhood special education.
- Each Head Start grantee must support and encourage the incorporation of transition planning for young children with disabilities into the overall disabilities service plan. This transition planning will include written coordinated transition services for children with disabilities and their families into and out of Early Head Start, Head Start programs, and Indiana Migrant Head Start programs.

C. Evaluation

- The local education agency shall be responsible for reviewing the evaluation data transmitted from First Steps or Head Start to determine if it is appropriate or sufficient to assist in determining the eligibility of a particular child for special education and related services. The local education agency shall utilize this information whenever appropriate to avoid unnecessary reassessment and delays in services.
- All families are entitled to be invited to a personal meeting with the LEA. This personal meeting with the LEA may occur at the First Steps transition conference or at a later time. The purpose of the personal meeting is to discuss the evaluation process as described in 511 IAC 7-25-4.

D. Case Conference

- Within 60 instructional days of the date the designated school personnel receive written parent consent for evaluation, the local education agency shall convene a case conference committee to discuss the results of the evaluation and determine eligibility for special education and related services. The 60 instructional day timeline cannot be used to deny services to the child who is three years old and in transition from Part C to Part B services.
- A First Steps service coordinator must be invited to the initial case conference committee meeting if the parent so requests. Additionally, the case conference committee must consider the child's IFSP. The First Steps service coordinator should make every effort to attend case conference committee meetings to which he/she is invited.
- Schools should invite a Head Start representative to the case conference meeting if the child meets Head Start eligibility criteria and Head Start may be one of the placement options for the child. Head Start personnel shall make every effort to attend case conference committee meetings to which they are invited.
- Local education agencies (LEA) are required to develop an individualized education program (IEP) for each eligible child with a disability. Whether or not children in Head Start meet the state criteria of disability under Part B, they may still be served and provided a full range of Head Start disability services. Head Start programs are required to develop IEPs representing all areas of comprehensive programming for children with diagnosed disabilities. The format of the Head Start administered plan includes all the basic components required in an IEP as outlined by Head Start Performance Standards on Services for Children with Disabilities (45 CFR 1308). Preschool children with disabilities enrolled in Head Start programs will therefore have a plan developed and administered by the LEA OR Head Start. A child with either plan will be counted toward the Head Start grantee's 10% enrollment for children with disabilities. Cooperative development of IEPs between each agency is encouraged to ensure the children receive services which meet their individual needs. There should be LEA and Head Start coordination of goals and objectives identified in each IEP when shared programming will occur.
- The Individualized Education Program (IEP) shall specify the child's program on the third birthday. Upon the eligible child's third birthday, a free appropriate public education (FAPE) begins.
- If a child turns three during the summer and the case conference committee recommends extended school year services in the IEP, the local education agency must provide them. Otherwise, the services may be initiated at the beginning of the upcoming year. While federal law requires states and local education agencies to ensure a "smooth and effective transition" for children from First Steps to Early Childhood Special Education, it mandates summer services only for those children found to need an extended school year services. This means that the eligible three year old child may or may not receive services in the summer. The First Steps provider(s) should prepare the family for this possibility.

E. Fiscal Issues

- All special education and related services to an eligible child become the financial responsibility of the local education agency on the child's third birthday. If local education agency policy allows, eligible children whose third birthdays occur in the fall may enroll in the early childhood special education program at the beginning of the school year. Therefore, if an IEP is completed a few months earlier than a child's third birthday and is signed by the parent, the school may begin to provide services immediately. However, the LEA is not obligated to provide services until the day of the child's third birthday.
- When a child who is eligible under Part C is determined to be ineligible under Part B, neither Part C nor Part B funds may be used to provide services after the child's third birthday.
- Under IDEIA, First Steps is responsible for assuring that provisions for early intervention are available at the local level. Provision of early intervention services occurs through a system of early intervention services, including infants and toddlers enrolled in Early Head Start. Under IDEIA, local education agencies (LEAs)

are responsible for assuring the identification, evaluation and provision of a free appropriate public education to children found to be in need of special education and related services, including those children enrolled in Head Start. First Steps must assure that early intervention services are provided and the LEA must assure that special education and related services are provided, but each system is not responsible for providing all services directly. IDEIA stresses the role of multiple agencies and assumes that the efforts of other agencies will be maintained.

- Head Start grantees are committed to fiscal support, in full or by combination of Head Start funds and other resources, to assure that services needed by children with disabilities will be provided. Head Start is fully committed to the maintenance of effort as required for all agencies by the IDEIA and by the Head Start Act. The local Head Start Disability Service Plan and local interagency agreements should contain plans for resource and cost sharing.
- The Head Start grantee, the First Steps system or the local education agency shall not reduce the extent or scope of their responsibilities for services to children with disabilities and their families as a result of collaborative agreements, except where agreed upon.

VII. DISPUTE RESOLUTION

The dispute resolution procedures in this agreement do not apply to individual child complaints, i.e., complaints that generally affect only a single child or the child's family. In IDEIA, these types of complaints are the responsibility of the agency responsible for establishing and maintaining procedural safeguards (due process procedures) in accordance with federal and state laws. These procedures do not apply to allegations of technical violations of the law. Each agency is responsible for receiving and resolving complaints when one or more requirements of the law are allegedly not being met by a public or private agency providing early intervention services or a local education agency providing early childhood special education services.

The parties to this agreement are committed to cooperatively plan and work together to meet the needs of young children with disabilities and their families. In instances of interagency conflict, every effort will be made to resolve the differences at the lowest level possible.

In the event of a difference of opinion in any matter related to the implementation of this agreement, disagreements regarding systemic issues of responsibility for service provision or compliance with the interagency agreement, the signatory agencies adopt the following procedures for resolution of disputes as a mechanism for making a determination that is binding on the signatory agencies:

Local Level

In all interagency disputes about matters related to this agreement, efforts should be made to resolve disagreements at the local level. A discussion will be held at the local level between all of the involved agencies. If resolution is not achieved at the local level, a written complaint will be initiated by the aggrieved agency within 5 working days of the date of the local level meeting to staff of the aggrieved agency's state level agency with copies to the other involved agency(s). The written communication shall identify the conflict, proposed action, and a summary of factual, legal and policy grounds.

State Agency Level

Staff from the involved agencies will meet to reach a solution. A written response, which includes proposed solutions to the conflict, shall be provided by the staff of the receiving agency within 15 working days of the notice of conflict.


In the event that resolution is not satisfactory to all agencies involved or when there are disputes between and among the state agencies, the staff and Directors or designees or their agency counterparts from the respective agencies will meet to reach a solution. Upon resolution of the conflict, a joint communiqué so indicating will be developed and disseminated by a representative from each agency. Should further action be required, a report from both agencies will be submitted to the agency heads for resolution. Upon resolution of the conflict, a joint communiqué, so indicating will be developed and disseminated by each agency head.

If the matter is still unresolved after this conflict resolution process, the parties will jointly refer the issues to the Governor's office for a final determination. Until final resolution of an interagency conflict, each of the parties to this agreement shall respect the policies and procedures of each agency. For the purposes of this agreement, timely resolution shall be 90 days.


VIII. Signature Page

This Memorandum of Agreement will become effective upon the signatures of the approving officials of the respective agencies and shall remain effective until supplanted by another Memorandum of Agreement. It shall be reviewed periodically by representatives of the signatory agencies and may be amended any time by mutual agreement of the participating agencies. Furthermore, this Memorandum of Agreement shall remain binding on all successors in interest of the signatories to this agreement and the agencies they represent.

SIGNATURES:

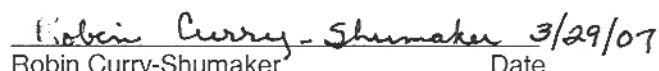
 12-19-2006
Dr. Suellen Reed Date
Superintendent of Public Instruction
Indiana Department of Education

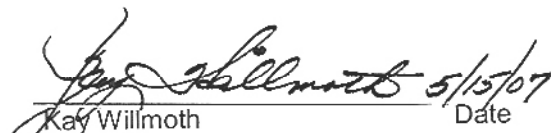
 12/22/06
James Robertson Date
Director
Division of Family Resources
Family and Social Services Administration

 3/16/07
Edward M. Bloom Date
Director
Division of Maternal and Children's
Special Health Care Services
Indiana State Department of Health

 1/11/07
Peter A. Bisbecos Date
Director
Division of Disability and Rehabilitation Services
Family and Social Services Administration

 3-22-07
Mary Hill Date
Deputy State Health Commissioner
Indiana State Department of Health

 3/29/07
Robin Curry-Shumaker Date
President
Indiana Head Start Association

 5/15/07
Kay Willmoth Date
Regional Program Manager
Office of Head Start
Administration for Children and Families

Glossary of Terms – Indiana Interagency MOA

Article 7	Indiana's special education rules promulgated in the Indiana Administrative Code at 511 IAC 7-17 through 7-31, effective June 12, 2002. The official version of the rules may be found in the Indiana Register.
Assessment	<p>The ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility to identify the child's unique strengths and needs and the services appropriate to meet those needs; and the resources, priorities, and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their child.</p> <p><i>(according to the Head Start Performance Standards)</i></p> <p>a. Developmental assessment – the collection of information on each child's functioning in these areas: gross and fine motor skills, perceptual discrimination, cognition, attention skills, self-help, social and receptive skills and expressive skills. <i>(according to the Head Start Performance Standards)</i></p>
CCC	Case Conference Committee (CCC) means a group of persons described in 511 IAC 7-27-3, Indiana's special education rules, including parents and school personnel, who are responsible for reviewing evaluation data and determining eligibility, developing, reviewing, and revising a student's IEP, determining the appropriate special education, related services, and placement for the student in the setting or settings in which the services will be provided, and other matters that are assigned to an IEP team by federal law or to a case conference committee by state law or rule of the Indiana State Board of Education.
Collaborate	Organizations coming together with a shared vision, resources, responsibilities and a commitment to make the outcome(s) of mutually beneficial for all partners.
Consent	<p>The parent has been fully informed of all information relevant to the activity for which consent is sought, and the parent understands and agrees in writing to carrying out the activity.</p> <p>Under IDEIA Part B and Part C, "consent" includes all of the following:</p> <ol style="list-style-type: none"> (1) The parent has been fully informed of all information relevant to the activity for which consent is sought, in the parent's native language or other mode of communication. (2) The parent understands and agrees in writing to the carrying out of the activity for which consent is sought, and the consent describes that activity and lists the records, if any, that will be released, and to whom. (3) The parent understands that the granting of consent is voluntary on the part of the parent and may be revoked at any time.
Coordinated Interagency System	Cooperation and shared responsibility of a service delivery system design to meet the varied needs of children and families. Head Start Performance Standards requires grantees to develop collaborations with partners in their communities, in order to provide the highest level of services to children and families, to foster the development of a continuum of family centered services, and to advocate for a community that shares responsibility for the healthy development of children and families of all cultures.
Early Head Start	Early Head Start (EHS) is a federally-funded family development program that provides services to low income families with children from birth to age 3 and to pregnant women. EHS encourages healthy prenatal outcomes, enhances the overall developmental progress of the young child, increases parents' skills and knowledge of child development, strengthens the family unit and promotes community building and staff development.
Evaluation	Procedures used to determine whether a child has a disability is eligible and the nature and extent of the services a child needs according to the federal/state rules of the agency.
Extended School Year	Extended school year (ESY) services means special education services that are provided

	to a student with disability beyond the normal school year of the public agency, according to the child's IEP, at no cost to the parent of the child, and meet the standards of the state education agency. ESY services must be provided for an eligible preschool child if the child's case conference committee determines that services are necessary to ensure the child receives a free appropriate public education.
FAPE	Free Appropriate Public Education (FAPE) - Eligible children must receive a free appropriate public education under Part B of IDEA. FAPE means special education and related services that meet state standards and are provided based on an IEP. The services are provided at public expense, under public supervision, without charge to the parents, and must be provided in the least restrictive environment (LRE).
ICC	Governor's Interagency Coordinating Council on Infants and Toddlers (ICC) is a federally required advisory council, comprised of governor appointed representatives of service providers, policy makers and consumers of early intervention services. The primary purpose of the ICC is to advise and assist the lead agency in implementing a family centered, interagency, community based system of early intervention.
Head Start	Head Start is a comprehensive federally-funded child development program for low-income children, ages 3-5, which provides services to promote academic, social, and emotional development. The program focuses on the family through encouraging active involvement in all aspects of the program, enhancing parenting skills, and providing referral services to assist in promoting self-sufficiency. Head Start grantees are federally mandated to designate a minimum of 10% of their funded enrollment for children with disabilities.
IDEA (IDEIA)	Individuals with Disabilities Education Act (IDEA), previously the Education of the Handicapped Act (EHA), was originally passed by the U.S. Congress in 1975. Its purpose was to ensure all children and youth with disabilities in the United States have access a free appropriate public education (FAPE). The legislation was amended in 1986 by Public Law 99-457, and included a new Part H—The Infants and Toddlers with Disabilities program for eligible birth through two year old children and their families. It also changed the existing Preschool Incentive Grant program to the Preschool Grant program under Section 619 of Part B for children with disabilities aged three through five. The IDEA has been amended a number of times with the most recent revisions occurring in 2004 through the Individuals with Disabilities Education Improvement Act (IDEIA). IDEIA has four parts: Part A-General Provisions; Part B-Assistance for Education of All Children with Disabilities; Part C-Infants and Toddlers with Disabilities; and Part D-National Activities to Improve the Education of Children with Disabilities.
IEP	Individualized Education Program (IEP) - A written document, developed by the case conference committee, that describes how a student will access the general education curriculum (for preschool children participation in appropriate activities) and the special education and related services needed to participate in the educational environment. The required components of an IEP are contained in state and federal regulations.
IFSP	Individualized Family Service Plan (IFSP) is a written plan for providing early intervention services to an eligible child and family. IFSP is a process and document that lists a family's priorities, concerns and resources in regard to their infant or toddler with disabilities. The required components of an IFSP are contained in state and federal regulations.
Indiana Migrant Head Start Program	The Texas Migrant Council, Inc. is a multi-state corporation that operates a Migrant and Seasonal Head Start Program in the states of Indiana, Ohio, New Mexico, Wisconsin, and Texas. The Northern Region service area of the Texas Migrant Council covers Indiana and Ohio. Indiana's Migrant Head Start program consists of eight sites in 13 agriculturally-based counties including Adams, Wells, Howard, Cass, Grant, Tipton, Madison, Marshall, Starke, St. Joseph, Knox, Marion, and Tippecanoe.
Instructional Day	Any day, including a partial day, that children are in attendance at school for instructional purposes (IDEIA, Part B).
LEA	Local educational agency (LEA) is a public board of education or other public authority legally constituted for either administrative control or direction, of, or to perform a service function for, publicly funded schools as such schools are established under the laws of Indiana. The term includes school corporations and state-operated schools.

LPCC	LPCC means the local planning and coordinating council, a regional planning and coordination group organized for the purpose of implementing the early intervention system as required by 20 U.S.C. 1435 and 34 CFR 303.
LRE	Least Restrictive Environment (LRE) – To the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are nondisabled. Further, special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. A continuum of alternative placements must be available to meet the needs of children with disabilities. The LRE requirements apply to all eligible students with disabilities ages three through 21.
Natural Environment	Settings (for Part C, early intervention settings) that are natural or normal for the child's same age peers who have no disabilities.
Parent (guardian, foster parent)	<p>The specific definitions for each agency are found below:</p> <p>Federal 34 CFR 303.19, Early Intervention</p> <ul style="list-style-type: none"> a. As used in this part, "parent" means - <ul style="list-style-type: none"> 1. A natural or adoptive parent of a child; 2. A guardian; 3. A person acting in the place of a parent (such as a grandparent or step-parent with whom the child lives, or a person who is legally responsible for the child's welfare); or 4. A surrogate parent who has been assigned in accordance with §303.406. b. <i>Foster parent.</i> Unless state law prohibits a foster parent from acting as a parent, a State may allow a foster parent to act as a parent under Part C of the Act if - <ul style="list-style-type: none"> 1. The natural parents' authority to make the decisions required of parents under the Act has been extinguished under State law; and 2. The foster parent - <ul style="list-style-type: none"> i. Has an ongoing, long term parental relationship with the child; (long term is defined as 12 or more months); ii. Is willing to make the decisions required of parents under the Act; and iii. Has no interest that would conflict with the interests of the child. <p>511 IAC 7-17-57, State Special Education Rule:</p> <p>“Parent” means one of the following:</p> <ul style="list-style-type: none"> 1. Any “natural or adoptive parent whose parental rights have not been terminated or restricted in accordance with law. 2. A guardian, including a court-appointed temporary guardian. 3. A person with legal custody, such as a grandparent or other relative, or other adult who accepts full legal responsibility for the student and with whom the student lives. 4. An educational surrogate parent appointed in accordance with 511 IAC 7-24. 5. Any student with a disability who is eighteen (18) years of age and has not had a guardian appointed by a court. <p>Head Start:</p> <p>Head Start “parent” means:</p>

	<ol style="list-style-type: none"> 1. a Head Start Child's mother or father, 2. other family member who is a primary care giver, 3. foster parent, 4. guardian or 5. the person with whom the child has been placed for purposes of adoption pending a final adoption decree. Note: All other sections of the regulations define "family" not "parent". <p>Children's Special Health Care Services (CSHCS):</p> <p>CSHCS' definition of "parent" means:</p> <ol style="list-style-type: none"> 1. A birth or adoptive parent of a child whose parental rights have not been terminated or restricted in accordance with law. <p>CSHCS' definition of "Guardian" means:</p> <ol style="list-style-type: none"> 2. A court-appointed guardian (such as a grandparent or other relative, or other adult) who accepts full legal responsibility for the child and with whom the child lives. 3. A person acting in loco parentis with legal authority to make health care decisions on behalf of the minor child (such as a Personal Representative) in accordance with HIPAA Privacy Rule 45 CFR Part 160 and Subparts A and E of Part 164. 4. A DFR director or designee for a Ward of Indiana
Part B	Part B: Part B contains requirements for providing special education and related services to children with disabilities from 3, but less than twenty-two years of age. See Individuals with Disabilities Education Improvement Act (IDEA 04).
Part C	Part C: Part C includes the requirements for providing services for infants and toddlers with disabilities, birth to age three years and their families. See Individuals with Disabilities Education Improvement Act (IDEA 04).
Public Awareness	Activities that focus on the early identification of children who are eligible for a specific program.
Screening	Screening - A preliminary look at a child's level of functioning in fine and gross motor, cognitive, speech and language, social and emotional development, and hearing and vision, as well as health information. The primary purpose is to identify children who need referral for diagnostic evaluation. The screening process may include obtaining a developmental and health history, observations from the parents, and input from teachers based on their observations. The screening process must use a valid, reliable, culturally relevant and appropriately named standardized tool. (<i>According to the Head Start Performance Standards</i>)
Special Education	Specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability. Special education also includes instruction in physical education, travel training, transition services, vocational education, and speech-language pathology services.
SPOE	SPOE means the system point of entry that serves as local lead agency and is the single point of contact in helping parents obtain services and assistance for infants or toddlers from birth through age 2 who are eligible for early intervention services as defined in section 16 of the First Steps Early Intervention System Rule.
Transition	Movement from one environment to another.
Transition Conference	A federally required planning meeting, under Part C, that is coordinated by the child's service coordinator to discuss and plan for activities that will support the family's transition into, within and from the early intervention system.
Typically Developing	Meeting developmental milestones expected of a child's same age peers without disabilities.